

COUNTY BOROUGH OF BOLTON
EDUCATION COMMITTEE



ANNUAL REPORT

OF THE

Principal School Medical
Officer

FOR THE YEAR 1953

RONALD W. ELLIOTT, M.D., M.Sc., D.P.H.,
Principal School Medical Officer

SPECIAL SERVICES SUB-COMMITTEE

Municipal Year 1953-1954

COUNCILLOR W. WHITTAKER (*Chairman*)

COUNCILLOR MRS. A. A. G. HOPEWELL (*Vice-Chairman*)

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COUNCILLOR A. TOWNEND

MRS. L. HOWE (*Co-opted Member*)

MR. A. HOWCROFT „ „

MR. J. E. PHYTHIAN „ „

MR. F. MILNER „ „

STAFF OF THE SCHOOL HEALTH SERVICE

Principal School Medical Officer	Dr. Ronald W. Elliott
Deputy Principal School Medical Officer	Dr. Hugh Bryant
School Medical Officers	Dr. John Litt
	Dr. Audrey Seddon
	Dr. Rosa M. Galloway
	Dr. Margaret T. McCaffrey
	(Resigned 21st March, 1953)
	Dr. William Lees
	(Commenced 26th January, 1953.
	Resigned 16th May, 1953)
	Dr. Eugene W. G. Birch
	(Commenced 26th May, 1953)
	Dr. Godfrey Galea
	(Commenced 25th June, 1953)

School Medical Officers worked part-time in both the Maternity and Child Welfare and School Health Services with the exception of Dr. John Litt, and were appointed as Assistant Medical Officers of Health and School Medical Officers.

Ophthalmic Surgeons	Dr. J. Ratcliffe (Part-time)
	Dr. J. Morrison (Part-time)
Ear, Nose and Throat Surgeon	Mr. G. G. Mowat (Part-time)
Principal School Dental Officer	Dr. Donald Davies
School Dental Officers	Mr. Stanley Bray
	Miss Dorothy Coates
	(Resigned 20th March, 1953)
	Mrs. Joyce O. Burton
	Mr. E. M. Longton (Part-time)
	(Commenced 4th June, 1953)
	Mr. A. G. W. Smith (Part-time)
	(Commenced 8th June, 1953)
	Mr. G. E. Frost
	(Commenced part-time
	9th November, 1953.
	Commenced full-time
	3rd December, 1953)
Dental Anaesthetists (Part-time)	Dr. H. J. Simmons
	(Commenced 6th July, 1953)
	Mr. J. B. Davies
	(Commenced 9th September, 1953)
Educational Psychologist	Mr. A. E. D. Schonfield
Social Worker	Miss E. C. Ross
	(Resigned 7th March, 1953)
	Miss M. Gumuchian
	(Commenced 13th July, 1953)
Speech Therapist	Mrs. F. Barber
Superintendent Health Visitor and School Nurse	Miss F. Holden
Deputy Superintendent Health Visitor and School Nurse	Miss J. MacEachern

NURSING STAFF

On the 31st December, 5 full-time School Nurses and 28 Health Visitors were working part-time on School Health, and part-time on Maternity and Child Welfare work—the equivalent of 11 full-time School Nurses.

The Superintendent Health Visitor supervised the work of the staff and was assisted by a Deputy.

DENTAL ATTENDANTS

There were 5 dental attendants employed on the 31st December.

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Health Department,
Civic Centre,
Bolton.

May, 1954

*To the Chairman and Members of the Special Services Sub-Committee
of the Bolton Education Committee.*

The medical inspection of school children, whether by routine or special examinations, has not shown any striking increase in number over the previous year. The Committee have, of course, expressed concern over the difficulties which have led to an insufficient number of examinations being carried out in the past. In order to meet the need for three routine inspections during school life, and the consequential re-inspections and special examinations resulting from these and other sources, it was necessary to increase the amount of medical time available. It was only possible to achieve this towards the end of 1953 and only at the beginning of 1954 was a full complement of medical personnel available; hence the reason for only a limited increase in the number of inspections that can be recorded. With the staff available at the end of the year, however, it does seem as though a much more satisfactory plan can be put into operation and that all the inspections required will be carried out during 1954. It is probable that each of the three groups concerned will largely be completed in one term and this should enable all entrants to be examined in the spring term, all primary school leavers in the summer term, and all secondary school leavers in the autumn term.

The Child Guidance Centre has continued to function without the services of a psychiatrist except for the relatively few sessions which the Area Psychiatrist has been able to devote to this work and which is admittedly insufficient. There would appear to be, however, every possibility of a psychiatrist being available for two sessions per week commencing at some date yet to be specified, in 1954.

The value of audiometry in the early detection of hearing defects and the use of this service as a complement to speech therapy and the investigations leading to the ascertainment of educationally sub-normal children, has been recognised by the Committee. An audiometer and school nurse trained in the use of this instrument will be introduced and will make a useful addition to the School Health Service during 1954.

The ascertainment of educationally sub-normal children and mentally defective children has been largely dealt with in the past by one of the school medical officers. The appointment of additional medical staff and the additional training of existing staff, will make available during 1954, three school medical officers who will be able to undertake this work.

The time of the single-handed speech therapist is fully occupied and indeed there exists a waiting list of cases to be treated. An extension of the service would seem to be desirable to meet the need.

Attention has been drawn recently to the difficulties being encountered by dermatologists in the treatment of infected conditions of the skin. Organisms, apparently, are quickly becoming resistant to the new anti-biotic drugs and so it is becoming increasingly difficult to clear up these conditions with the new drugs. There is a tendency to turn more and more to the older remedies. This is reflected in a minor way by the fact that the incidence in recent years of such diseases as impetigo has not continued on its hitherto downward trend and indeed, has shown some slight increase during the past few years. The trend is emphasised by the figures recorded in this report.

An investigation which may eventually have considerable value, has been carried out during the year in connection with Category 'C' children and their habits with regard to the taking of school meals and milk. A summary of this investigation is given on page 16 and may be well worth repeating in future years.

Although there were large numbers of examinations carried out by school nurses for uncleanliness and there were facilities readily available in the form of cleansing materials, and the use of the Cleansing Station, 2,262 individual pupils were found to have head infestations. This is approaching 10% of the school population and is higher than the general national average of between 6 and 7 per cent. Reservoirs of infestation undoubtedly exist in the homes of these school children from which they are frequently re-infested after cleansing. The work of the School Health Service staff on the problem is difficult and often unrewarding under these circumstances. Parents could play a greater part in helping to reduce the incidence of infestation.

I would like the Committee in the coming year to give serious consideration to the future of Charles Street Clinic which, as Members will know from their recent inspection, is far from satisfactory. Much depends upon the future distribution of the school population and it may be necessary to consider the school clinic provision for the town as a whole and to have in mind not only a final scheme but also one which will overcome the difficulties of the interim period.

I should like to thank all members of the School Health Service for their help and co-operation during the year, and particularly the Chief Education Officer and his administrative and teaching staffs for their invaluable help.

Ronald W. Weir

Principal School Medical Officer.

GENERAL INFORMATION

No. of School children attending maintained schools...	24,060
Nursery School children	173
Primary School children	17,665
Secondary Modern School children	4,602
Secondary Technical School children	557
Secondary Grammar School children	721
Children attending Special Schools	342
No. of Schools maintained by the Authority	92
Nursey Schools	2
Primary Schools	72
Secondary Schools	15
Special Schools	3

MEDICAL INSPECTION OF SCHOOL CHILDREN

In August, 1953, the Minister made new Regulations governing the School Health Service and Handicapped Pupils which replaced those issued in 1945.

The Authority was required to make such arrangements as would ensure that every pupil attending schools maintained by the Authority would receive general medical inspection on not less than three occasions during the period of his or her compulsory school age, and such other medical inspections as may be necessary or desirable.

In Bolton, the practice is for each child to be examined on entering school, again in the last year of attendance at a primary school and finally, in the last year of attendance at a secondary school. Children also received special medical examinations at the request of the parents or teachers.

Periodic Medical Examinations

Number of children examined in the above Groups:

Entrants	2,807
Second Age Group	2,002
Third Age Group	1,683
<i>Total</i>	<u>6,492</u>
Other Periodic Examinations	428
GRAND TOTAL	<u><u>6,920</u></u>

Other Examinations

Special Examinations	8,080
Re-Inspections	8,810
TOTAL NUMBER OF OTHER EXAMINATIONS	<u><u>16,890</u></u>

During 1953, 16,890 special and re-inspections were carried out compared with 16,070 in 1952.

RESULT OF INSPECTIONS

Defects Found

Defect or Disease	Periodic Inspections		Special Inspections	
	No. of defects		No. of defects	
	Requiring treatment	Requiring to be kept under observation but not requiring treatment	Requiring treatment	Requiring to be kept under observation but not requiring treatment
Skin	97	77	370	4
Eyes:				
a. Vision	611	225	91	10
b. Squint	91	92	19	8
c. Other.. .. .	30	32	77	5
Ears:				
a. Hearing	54	110	138	54
b. Otitis Media ..	52	62	129	7
c. Other.. .. .	21	24	144	28
Nose and Throat ..	177	603	487	151
Speech	18	125	39	26
Cervical Glands ..	15	241	29	11
Heart and Circulation..	20	66	22	31
Lungs	48	182	111	43
Developmental:				
a. Hernia	14	50	—	—
b. Other.. .. .	18	121	12	4
Orthopaedic:				
a. Posture	13	67	5	—
b. Flat Foot	5	42	12	1
c. Other.. .. .	49	176	55	12
Nervous System:				
a. Epilepsy	5	21	14	10
b. Other.. .. .	1	14	16	2
Psychological:				
a. Development ..	4	17	38	3
b. Stability	2	24	19	12
Other	39	78	326	52

There was a reduction in the total number of defects found at the Periodic Medical Inspections from 2,561 in 1952 to 1,378 in 1953. This decrease was not unexpected because fewer of the Entrant Group, which is usually the main source of defects, were examined in 1953.

Pupils Found to Require Treatment

Group	For defective vision (excluding squint)	For any of the other conditions recorded in previous table	Total individual pupils
Entrants	124	348	493
Second Age Group	258	246	475
Third Age Group	210	115	325
<i>Total</i>	592	709	1,293
Other Periodic Inspections ..	19	58	78
GRAND TOTAL	611	767	1,371

ARRANGEMENTS FOR TREATMENT AND SPECIAL EXAMINATIONS

Minor Ailments:

Consultation and Treatment Sessions—Doctor in Attendance

SCHOOL CLINIC	DAY AND TIME OF COMMENCEMENT
Robert Galloway Clinic, Ward Street.	Monday and Tuesday, 2.0 p.m. Thursday, 9.0 a.m.
Charles Street Clinic, off Folds Road.	Wednesday, 2.0 p.m. Saturday, 9.0 a.m.
The Withins School Clinic, Withins Lane, Brightmet.	Friday, 9.0 a.m.
Astley Bridge School Clinic, Moss Bank Way.	Monday, 9.0 a.m.

Minor Ailment Treatment Sessions—Nurse only in Attendance

SCHOOL CLINIC	DAY AND TIME OF COMMENCEMENT
Robert Galloway Clinic, Ward Street.	9.0 a.m. and 2.0 p.m. Monday to Friday, and Saturday, 9.0 a.m.
Charles Street Clinic, off Folds Road.	9.0 a.m. and 2.0 p.m. Monday to Friday, and Saturday, 9.0 a.m.
The Withins School Clinic, Withins Lane, Brightmet.	9.0 a.m. Monday to Friday
Astley Bridge School Clinic, Moss Bank Way	9.0 a.m. Monday and Saturday. 2.0 p.m. Tuesday to Friday.

Treatment Centres with only a school nurse in attendance, are established at the following schools:—

Brownlow Fold	Thursday morning
Gaskell Street	Thursday morning
Top o'th' Brow	Wednesday morning
Whitecroft Road	Wednesday morning

Dental Surgeries:

The six Dental Surgeries are situated as follows:—

Charles Street School Clinic	2 Surgeries
Robert Galloway Clinic	2 Surgeries
Astley Bridge School Clinic	1 Surgery
The Withins School Clinic	1 Surgery

Because of staff depletion, the arrangements for dental treatment have varied at times to meet the changing situation.

Aural Clinics:

The Consultant Aural Surgeon normally attended fortnightly at both the Charles Street School Clinic and the Robert Galloway Clinic to see by appointment school children who were referred by the school medical officers. In order that children should not have to wait a long period before being seen, 10 extra sessions were held between the 16th April and the 18th June, 1953.

Ophthalmic Clinics:

The Consultant Ophthalmic Surgeons attended at the Charles Street and Robert Galloway Clinics for a total of 17 hours per week to examine by appointment children referred by the school medical officers. The Clinics were held as follows:—

Monday afternoon	}	at Charles Street School Clinic
Wednesday morning		
Friday morning		

Monday morning	}	at the Robert Galloway Clinic
Wednesday afternoon		
Friday afternoon		
Saturday morning		

Morning sessions commenced at 9.30 a.m., and afternoon sessions at 2.30 p.m.

Child Guidance:

The Child Guidance Centre from which the Educational Psychologist and the Psychiatric Social Worker conducted their work, is situated at the Robert Galloway Clinic. Children were seen by appointment.

Speech Therapy:

The Speech Therapist continued to work in her Centre at the Robert Galloway Clinic. Children were referred by the school medical officers and attended by appointment.

Audiometry:

Arrangements exist whereby the examination by appointment of children referred by the school medical officers, was carried out at the Thomasson Memorial Special School for the Deaf. A Pure Tone Audiometer was used and the audiogram made available to the medical officer.

The Authority have purchased an additional audiometer and a school nurse will shortly attend a course of instruction at Manchester University in the use of the instrument. It is anticipated that an audiometric screening of Bolton school children will begin in 1954.

The following table shows the number of Pure Tone Audiometer Tests carried out, together with the number of children found by this method to need special education or treatment.

HEARING TESTS				BOYS	GIRLS
No. of Pure Tone Audiometer Tests completed	32	30			
No. of children found to be partially deaf and recommended for admission to the Thomasson Memorial Special School	1	—			
No. of partially deaf children recommended for hearing aids...	3	2			

Other Treatment:

Arrangements for other types of special treatment (paediatric, orthopaedic, etc.), were made with the consultant physicians and surgeons of the local hospitals. In each case, the family doctor was consulted before the appointment was made and he was sent a copy of the appropriate report.

NOTES ON SPECIFIC DEFECTS

Diseases of the Skin:

	Number of cases treated or under treatment	
	By the Authority	Otherwise
Ringworm:		
(i) Scalp	—	1
(ii) Body	3	—
Scabies	4	—
Impetigo	74	2
Other skin diseases	289	34
TOTAL	370	37

There has been an increase in the number of septic skin conditions including impetigo treated in the clinics, compared with 1952. From 1942-1948, there was a significant fall each year in the number of cases of impetigo but this fall has not been maintained in the last five years.

Cases of Impetigo treated in the School Clinics

Year	No. of Cases	Year	No. of Cases
1942	158	1948	46
1943	133	1949	71
1944	102	1950	45
1945	115	1951	39
1946	99	1952	51
1947	92	1953	74

Defects of the Ear, Nose and Throat:

Attending for the first time for examination by the Aural Surgeon were 595 children, making 921 attendances in all.

Children placed on the hospital list for admission for the removal of tonsils and adenoids have a waiting period of 12-14 months before admission.

The following table shows the numbers of diseases and defects of the Ear, Nose and Throat for which treatment was initiated by the school medical officers in the Minor Ailment Clinics or by the Specialist at the Aural Clinic.

	Number of Cases Treated	
	By the Authority	Otherwise
Received operative treatment		
for diseases of the ear	—	—
for adenoids and chronic tonsillitis	—	93
for other nose and throat conditions	—	4
Received other forms of treatment ..	180	51
TOTAL	180	148

Mr. G. Gordon Mowat, the Consultant Aural Surgeon, reports:—

“Firstly, I would like to stress the advantages of routine daily treatment including the treatment by injection or otherwise with anti-biotics. This, I think is of the first importance in the treatment of aural discharge. In this respect, all the usual anti-biotics should be available if necessary, but they are, of course, to be used with discretion.

Secondly, increased co-operation with the Infirmary. All the cases seen at the school clinics which require operation are operated upon at the Infirmary. Consequently, the clinics are in effect, an extra Out-patient Department. They should, therefore, have all the facilities that are available in the Out-patient Department at the Infirmary.

On the whole I think the clinics are working well and we hope, in the near future, to be able to reduce the long waiting list for removal of tonsils and adenoids.”

Diseases of the Eye:

The Ophthalmic Surgeons examined 1,617 children for the first time. The total number of attendances was 6,632. Of these, 6,254 were for refraction, repair to glasses and re-examinations, and 378 for diseases of the eye, e.g. conjunctivitis and hordeolum.

Arrangements for the supply of spectacles were made through the Supplementary Ophthalmic Services of the Local Executive Council. If the Ophthalmic Surgeon recommended spectacles, the parents could obtain them from the optician of their choice through the National Health Service. Children were requested to attend the clinic again to ensure that the spectacles were, in fact, suitable. The repair or replacement of spectacles was arranged in 323 cases—a proportion of them at the Authority's expense under the terms of the Education Act, which differs in this respect from the National Health Service Act.

The Consultant Ophthalmic Surgeons report that the work at the Ophthalmic Clinics has proceeded satisfactorily and smoothly. A most interesting point which they noticed was the increased co-operation from the parents who came along for interview on the completion of the examination of the child. They considered that this was a most important part of the work and were pleased that this year had shown a definite increase in parental interest.

The number of cases of eye diseases, defective vision or squint, for which treatment was initiated by the school medical officers and given either in the ophthalmic clinic or otherwise, was as follows:—

	Number of Cases dealt with	
	By the Authority	Otherwise
External and other conditions excluding errors of refraction and squint ..	128	7
Errors of refraction (including squint)	1,489	25
TOTAL	1,617	32
Number of pupils for whom spectacles were: Prescribed	1,304	25
Obtained	1,225	25

The number of children, by age groups and defects, found at periodic medical inspection to require attention for defects of the eye:—

Defect	Age Group			
	Entrants	Second Age Group	Third Age Group	Other Periodic Inspections
Defective Vision.. ..	124	258	210	19
Squint	44	26	7	15
Blepharitis	13	4	4	2
Other	12	12	4	2

The number of entrants found to have defective vision was 124 compared with 747 in 1952. This decrease was not unexpected since fewer entrants were examined in 1953. In addition, a more satisfactory method using the 'E' card was adopted for testing the vision of entrants.

Defective Colour Vision:

Routine colour vision testing by the use of the Ishihara Charts was introduced for children in the second age group and continued for children in the third age group. 3,685 children were examined and the total of 44 colour blind pupils discovered was made up as follows:—

	BOYS	GIRLS
Primary School Leavers	10	2
Secondary Modern and Senior Schools	19	—
Technical Secondary Schools	8	2
Grammar Schools	3	—
TOTALS	40	4

Orthopaedic Defects:

A total of 139 children were found to have orthopaedic defects, 67 on periodic medical inspections and 72 at school clinics.

Children with orthopaedic defects were, if necessary, referred to the Orthopaedic Out-Patients' at the Bolton Royal Infirmary and close liaison was maintained with the consultant surgeon and the physiotherapist at this clinic. The school medical officers visited the clinic on many occasions and were responsible for referring 68 school children for a consultant opinion.

Uncleanliness:

Routine head inspections were carried out on all school children in maintained schools, 40,247 such examinations being made and 2,262 individual pupils were found to be verminous.

"Notices to Cleanse" under Section 54(2) of the Education Act were issued on 117 occasions, and 31 "Cleansing Orders" under Section 54(3). These figures indicate that most of the pupils affected had a minor degree of infestation and that parents had dealt with the situation within a short time. Supplies of cleansing materials were available through the School Health Service and fine-tooth combs could be purchased by the parents from the Health Department.

Arrangements were made in conjunction with the Health Department for the cleansing of unclean and verminous children at the Municipal Medical Baths, Kingsgate, until the opening of the School Hill Cleansing Station in July, 1953. The School Hill Cleansing Station has two baths equipped with showers, and male and female staff are in attendance. During the year, 32 boys and 154 girls were cleansed either at the parents' request or under a "Cleansing Order". In addition, 2 boys and 3 girls were treated at the centre for scabies.

INFECTIOUS DISEASES IN SCHOOLS

The epidemic of measles and whooping cough which commenced in the latter months of 1952 continued into early 1953, cases occurring mainly amongst children in their first two years in primary schools. There have been no serious complications and the infection appeared to be mild in type.

In the latter part of the year, there was a rise in the number of cases of dysentery throughout the population, and an outbreak of sonne dysentery occurred in a primary school affecting 45 school children, one school teacher and two servers of school meals. It is not possible to say how this outbreak originated, although one of the school meals servers was amongst the first affected. Considerable investigation took place, and all positive cases or carriers were treated by their own doctors. In view of the large number of children affected in the school, it was felt that once a child's symptoms had abated, no purpose was to be gained by exclusion from school. Adults engaged in food handling were, however, excluded until all symptoms had abated and the stools on examination were free of the infecting organism. The opportunity was taken to make an analysis of the sterilising agent used in the washing-up water. This was found to be unsatisfactory and it was recommended that it should be replaced with a more efficient agent. The co-operation given and interest shown by the headmaster, teaching staff, and members of the School Meals Service, greatly helped in the control of this epidemic.

Incidence of Infection:

Disease	Number of Cases												Total
	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	
Scarlet Fever	36	13	24	12	20	19	4	10	15	20	36	28	237
Measles	762	301	72	45	19	15	20	37	15	10	4	1	1,301
Whooping Cough ..	93	92	101	91	64	49	41	20	11	9	5	9	585
Pneumonia	23	22	13	3	4	7	—	2	1	4	10	16	105
Poliomyelitis	—	—	—	—	—	—	—	—	—	1	—	—	1
(Paralytic)													
Poliomyelitis	—	—	—	—	—	—	—	—	—	—	1	—	1
(Non-Paralytic)													
Enteric Fever	—	—	1	—	—	1	—	—	—	—	—	—	2
(Paratyphoid B.)													
Dysentery	13	1	—	—	1	—	3	11	5	35	47	84	200
Food Poisoning	3	—	—	—	—	1	2	4	1	—	6	7	24
Erysipelas	—	—	—	—	1	—	—	1	—	—	—	—	2

Age at Infection:

The number of notifications of the commoner infectious diseases occurring in children up to 15 years of age:—

Disease	Age																	Total
	Under 1	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15		
Scarlet Fever	—	4	8	15	32	56	36	22	10	17	14	10	6	5	2	—	237	
Measles	57	150	234	212	230	218	116	34	19	7	7	2	6	5	3	1	1,301	
Whooping Cough ..	60	45	97	110	90	100	54	8	9	4	3	1	3	1	—	—	585	
Pneumonia	20	16	13	14	14	11	5	3	1	1	2	2	1	2	—	—	105	
Poliomyelitis (Paralytic)	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	
Poliomyelitis (Non-Paralytic) ..	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	
Enteric Fever (Paratyphoid B.)	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	2	
Dysentery	5	20	30	22	20	25	28	14	7	4	12	7	4	2	—	—	200	
Food Poisoning ..	1	10	2	3	2	2	3	—	—	—	—	—	1	—	—	—	24	
Erysipelas	—	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	2	

IMMUNISATION

Immunisation against Diphtheria and Whooping Cough was offered to children in their first year at school and of these, 237 were immunised against Diphtheria and 580 were given a combined immunisation against Diphtheria and Whooping Cough. Those children who had been immunised against Diphtheria in infancy and who received a re-inforcing dose against Diphtheria numbered 587.

THE GENERAL CONDITION OF SCHOOL CHILDREN

Results of Examinations carried out at Routine Medical Inspections:

The general condition of school children has remained satisfactory. Of the 6,920 children examined in school, 2,766 or 39.97% were above average, 4,056 or 58.61% average, and 98 or 1.42% below average.

The following table gives details under the various age groups:—

Age Groups (1)	Number of Pupils In- spected (2)	Above Average		Average		Below Average	
		No.	% of Col. (2)	No.	% of Col. (2)	No.	% of Col. (2)
Entrants	2,807	1,171	41.72	1,583	56.39	53	1.89
Second Age Group	2,002	643	32.12	1,336	66.73	23	1.15
Third Age Group	1,683	827	49.14	853	50.68	3	.18
Other Periodic Inspections . .	428	125	29.21	284	66.36	19	4.43
TOTAL	6,920	2,766	39.97	4,056	58.61	98	1.42

Special Investigation:

At the request of the Special Services Branch of the Ministry of Education, investigation was made into the number of Category 'C' children receiving school meals and milk, and subsequently a follow-up was carried out. The results obtained are summarised below.

SCHOOL DINNERS:

IN 1952 a total of 126 school children were classified as Category 'C' at medical inspection. Of these—

- 13 were receiving free meals
- 59 were receiving meals on repayment
- 54 were not receiving school meals

These children were all born in the 1945-6-7 age groups.

A follow-up carried out recently, shows that of these 126 children—

- 45 are still receiving school dinners
- 3 have left the area
- 8 have been admitted to a residential open-air school
- 4 do not like school dinners and have been withdrawn by their parents for this reason
- 2 state that the meals are too expensive
- 47 go home because their parents prefer them to do so
- 1 goes to an aunt's for dinner
- 14 go home because their mothers have now stopped working and are able to prepare a meal at home
- 1 has been admitted to a school for the educationally subnormal
- 1 has been excluded from school as ineducable

Of the 45 still receiving meals, 7 were receiving free meals.

IN 1953, of 53 children classified as Category 'C'—

- 3 were receiving free meals
- 33 were receiving meals on repayment
- 17 were not receiving school meals

These children were all born in the 1947-1950 age groups.

Recent investigation shows that of these 53 children—

- 30 are still receiving dinners at school
- 2 have left the area
- 3 go home because their mothers have now stopped working and are able to prepare a meal at home
- 1 has moved nearer the school
- 1 goes to an aunt's for dinner
- 16 go home because their parents prefer them to do so

One child is receiving meals without payment.

SCHOOL MILK:

IN 1952, of the 126 children classified as Category 'C'—

- 107 are now receiving milk
- 8 have been admitted to an open-air school
- 3 have left the area
- 1 has been admitted to a school for the educationally subnormal
- 1 has been excluded from school as ineducable
- 6 do not like milk

IN 1953, of the 53 children classified as Category 'C'—

- 50 have milk in school
- 2 have left the area
- 1 does not like milk

SUMMARY:

An anxiety has been expressed that needy children may not be receiving the full benefits of the Nutritional Schemes in Schools. As far as the Free Milk Scheme is concerned, this is not borne out since at least 85% of the 1952 Category 'C' entrant children received milk and this rose to at least 94% in 1953, which is above the average (approximately 81%) for Bolton children as a whole. The situation was not, however, so good with regard to School Meals. In 1952, about 57% of Category 'C' entrant children received School Meals and this rose to about 68% in 1953. These proportions are, however, higher than that for all Bolton school children which was approximately 41% in 1953.

The Milk in Schools Scheme:

The number of children taking milk in school under the above scheme was such as to give an average throughout the year of 80.62% of all children in school. All the milk was derived from sources which were satisfactory as regards to quality and safety.

The School Meals Service:

A total of 2,222,972 dinners were produced in the School Kitchens and the percentage of school children taking dinner in school was 40.83. The meals were produced in five Central Kitchens and there were fourteen Kitchen/Dining Centres. The important co-operation between the School Meals Service and the Sanitary Inspectors of the Health Department has been further developed by arranging for the staff of the School Meals Service to receive a course of lectures from the Chief Sanitary Inspector on Food Hygiene.

DENTAL HYGIENE

Report of the Principal School Dental Officer

Loss of staff at the end of 1952 and the beginning of 1953 reduced the staffing position to its lowest figure since 1945. Over the year there was the equivalent of $3\frac{5}{12}$ full-time Dental Officers; in 1952 the figure was $5\frac{1}{2}$.

There being no response to advertisements for full-time employment, in order to alleviate the strain on the service with over 7,000 children in the care of each Dental Officer, three changes were introduced. Part-time employment was advertised and two local General Dental Practitioners offering their services were appointed to give a total of three half-days weekly to the School Dental Service; two Dental Anaesthetists were appointed on a part-time basis also giving three half days weekly; and evening clinics were held for the attendance and treatment of 'casual' patients so that the normal working day was available for routine work by appointment.

Specialists in Dental Anaesthesia have not previously been employed in Bolton in peace-time, it being customary for two Dental Officers and their attendants to work together for General Anaesthetic sessions. This arrangement works most satisfactorily but the employment of Anaesthetists has the advantage of freeing a Dental Officer for purely dental work for a corresponding number of sessions.

These measures enabled the service to pass through this difficult period without losing too much ground. The average number of patients treated by Dental Officers throughout England and Wales in twelve months is very constant at 1,500 each. This figure has applied to Bolton but for 1953 it was increased to 1,750. Nevertheless, the fall in staff is reflected in the reduced number of children inspected in school, 12,370 compared with 16,268 in 1952, and in the number of attendances at the clinics, 10,482 compared with 12,991 in 1952.

In December, an additional full-time appointment was made and there was promise of further progress in 1954.

Dental Inspection and Treatment:

(1) Number of pupils inspected by the Authority's Dental Officers:—

(a) Periodic inspections	...	...	...	...	...	...	...	12,370
(b) Special inspections	...	...	...	...	...	...	...	3,148
TOTAL	...	...	...	...	...	...	...	15,518
(2) Number found to require treatment	...	...	...	...	...	...	...	10,479
(3) Number referred for treatment	...	...	...	...	...	...	...	8,927
(4) Number actually treated	...	...	...	...	...	...	...	6,043
(5) Attendances made by pupils for treatment	...	...	...	...	...	...	...	10,482
(6) Half-days devoted to: Inspection	...	...	...	...	...	...	...	76
Treatment	...	...	...	...	...	...	...	1,599
TOTAL	...	...	...	...	...	...	...	1,675

(7)	Fillings: Permanent Teeth	2,400
	Temporary Teeth	937
	TOTAL	<u>3,337</u>
(8)	Number of teeth filled: Permanent Teeth... ..	2,098
	Temporary Teeth	852
	TOTAL	<u>2,950</u>
(9)	Extractions: Permanent Teeth	3,038
	Temporary Teeth	10,101
	TOTAL	<u>13,139</u>
(10)	Administration of general anaesthetics	3,680
(11)	Other operations: Permanent Teeth	1,195
	Temporary Teeth	832
	TOTAL	<u>2,027</u>

MINOR AILMENTS

The following table indicates the number of children who attended each of the clinics and also the number seen by the medical officers for the first time and on subsequent visits.

Clinic or Centre	No. of individual children who attended	No. seen by medical officer on first visit	No. of subsequent visits to medical officer	Total No. of attendances	Minor Ailments seen by nurse only
Robert Galloway ..	1,998	1,085	692	9,329	1,890
Charles Street.. ..	1,463	674	245	7,965	2,143
The Withins	354	200	100	1,312	304
Astley Bridge	409	237	115	1,351	306
Treatment Centres..	388	—	—	1,080	1,003
TOTALS.. ..	4,612	2,196	1,152	21,037	5,646

The number of visits by children to the treatment centres in schools—

Whitecroft Road	333
Top o'th' Brow	68
Gaskell Street	368
Brownlow Fold	311

THE PROMOTION OF PHYSICAL FITNESS

Physical Education played an important part in the school curriculum. The increasing use of small and large apparatus gives scope for improved facilities in skills, for increased arm strength, general mobility and posture, and confidence in personal achievement is acquired.

Swimming continued to increase in popularity, and excellent results were attained in the Royal Life Saving Society's examination.

Athletics, games and the various branches of dancing reached a good standard. Demonstrations and courses for teachers have been held throughout the year, interest and enthusiasm being shown by the very large audiences.

Holiday Camps:

Three hundred and thirteen children were medically examined to ascertain their fitness for attendance at Holiday Camps.

REPORT ON THE WORK OF THE CHILD GUIDANCE CENTRE

The relevant statistics are presented in the following table, and the main change, compared with 1952, has been the increase in the number of children referred. The waiting list has grown and continues to grow. Although there has also been an increase in 'output', this cannot be considered entirely praiseworthy since the quality of work necessarily suffers when pressure is too great.

Attendances at the Child Guidance Centre:

The number of children interviewed was 241, of which 156 were boys and 85 were girls. All these children attended for the first time.

AGE GROUPS:

No. of children seen	Years of Age													
	4	5	6	7	8	9	10	11	12	13	14	15	Over 15	Total
	—	11	20	35	26	28	22	35	20	18	15	5	6	241

SOURCES OF REFERRAL:

School Medical Officer	...	...	...	...	...	...	50
Schools	...	...	...	...	...	...	128
Parents	...	...	...	...	...	...	16
Children's Department	...	...	...	...	...	...	6
Hospitals and General Practitioners	...	...	...	...	...	...	14
Chief Education Officer	...	...	...	...	...	...	25
							241

PRESENTING PROBLEMS:

Educational and Intelligence	...	...	...	...	...	136
Behaviour Disorder	...	...	...	...	...	34
Habit Disturbance	...	...	...	...	...	33
Special Cases (Epilepsy, Deafness, Spastics, etc.)	...	...	...	...	...	38

DISPOSAL:

General advice given or referred elsewhere	...	125
Individual treatment at Centre		34
Educationally Sub-normal		36
Recommended to Principal School Medical Officer		
as ineducable		17
Waiting list or pending		29
	—	241

In addition, 19 children who remained on the books from 1952, received individual treatment at the Centre.

HANDICAPPED PUPILS

In July 1953, the Minister made new Regulations governing the School Health Service and Handicapped Pupils, and these came into operation on the 4th August.

There was an alteration in the categories of handicapped pupils and in certain of the definitions. The word 'curriculum' in the old Regulations is now replaced by 'regime', which would appear to have a wider meaning.

The definition of 'partially deaf' pupils has been slightly amended with a view to clarification. There is no longer a separate category of diabetic pupils who are now included in the general category of 'delicate'. In the former Regulations, epileptic and physically handicapped pupils were so defined as to imply they could not be educated in ordinary schools. Many such children can, in fact, be educated in ordinary schools if special arrangements are made, or facilities provided, to enable them to overcome their particular difficulties. Such arrangements or facilities constitute a departure from the normal regime of ordinary schools and the new definitions have the effect of bringing within their scope all physically handicapped and epileptic children who are able, with some degree of special help, to attend ordinary schools.

The definition of 'delicate' pupils has been changed to make this the residual category covering all handicapped pupils who do not specifically come under the heading of one of the other handicaps. This category now includes diabetic pupils.

The definition has also been slightly widened to take account of the fact that some delicate pupils can be educated under the normal regime of ordinary school, but may need a change of environment to make this possible, e.g. some pupils with asthma.

It is now no longer necessary to get special consent from the Minister before a physically handicapped, epileptic or aphasic pupil can be educated otherwise than in a special school, or before a blind or epileptic pupil can be educated otherwise than in a boarding school.

Ascertainment in 1953:

The following children have been ascertained in the specified categories as in need of special educational treatment:—

Blind	...	1
Partially Sighted	...	5
Deaf	...	—
Partially Deaf	...	1
Educationally Sub-normal	...	26
Epileptic	...	2

Maladjusted	I
Physically Handicapped	I
Pupils suffering from Speech Defects	50
Delicate	54
TOTAL	141

Total Number of Children Ascertained:

At the end of the year, there were 300 handicapped pupils receiving special educational treatment and the following table gives details.

CATEGORY OF HANDICAP	SPECIAL SCHOOL	NO. OF PUPILS	
		BOARDERS	DAY
BLIND	Junior School for the Blind, Liverpool...	3	—
	Royal Normal College for the Blind, Rowston Castle	I	—
	Henshaw's School for the Blind, Man- chester... ..	3	—
	Condoover Hall, Shrewsbury... ..	2	—
	Overley Hall, Wellington	I	—
	Sunshine Home, Southport	I	—
PARTIALLY SIGHTED	Barclay School, Sunninghill, Berks. ...	I	—
	Preston School	2	—
DEAF	Thomasson Memorial Special School, Bolton	4	II
	Royal School, Manchester	I	—
	Mary Hare Grammar School, Newbury	I	—
	Royal Cross School, Preston	I	—
	Lawns House School, Leeds	I	—
PARTIALLY DEAF	Thomasson Memorial Special School, Bolton	I	IO
DELICATE	Lostock Open Air Special School, Bolton	136	—
PHYSICALLY HANDICAPPED	National Children's Home, Chipping Norton	I	—
	Margaret Barclay School, Mobberley...	I	—
	Burton Hill House School, Malmesbury	I	—
	Bradstock Lockett, Southport	I	—
	Rudolf Steiner School, Aberdeen (Inde- pendent School)... ..	I	—
EDUCATIONALLY SUB-NORMAL	Woodside Special School, Bolton ...	—	104
	St. Francis School, Birmingham... ..	2	—
	Great Stony School, Chipping Ongar...	I	—
EPILEPTIC	Maghull Homes, Liverpool	3	—
	Colthurst House School, Alderley Edge	2	—
	Soss Moss School, Chelford... ..	I	—
	Chalfont St. Peter School, Bucks... ..	I	—
MALADJUSTED	Westhope Manor School (Independent School)	I	—
	Totals	175	125
	TOTAL	300	

The following pupils were ascertained as in need of special educational treatment but at the end of the year, arrangements for accommodation had not been completed:—

Blind	1
Partially Sighted	4
Delicate	8
Physically Handicapped	5
Educationally Sub-Normal	8
Epileptic	1

Special Schools in Bolton:

WOODSIDE DAY SPECIAL SCHOOL FOR EDUCATIONALLY SUB-NORMAL CHILDREN:

The following are the relevant figures of children on the roll, admitted and discharged during the year.

	BOYS	GIRLS
No. of children on the roll, Dec., 1953... ..	56	48
No. of children admitted during 1953	16	10
No. of children discharged during 1953	10	11

A medical officer visited the school twice weekly and each pupil received a routine school medical inspection during the year.

THOMASSON MEMORIAL DAY AND RESIDENTIAL SPECIAL SCHOOL FOR DEAF AND PARTIALLY DEAF CHILDREN:

Pupils were admitted from all parts of the country. With a few exceptions, the children who lived in Bolton or nearby, attended as day scholars; the remainder were resident.

A school medical officer visited the school twice weekly and made 80 examinations at the request of the headmistress, and 98 routine inspections. The Consultant Aural Surgeon paid 6 visits and carried out 149 examinations.

The following children attended during 1953—

BOLTON AREA:	BOYS	GIRLS
No. of children on the roll, Dec., 1953... ..	14	12
No. of children admitted during 1953	1	3
No. of children discharged during 1953	1	4

OUTSIDE AREAS:	BOYS	GIRLS
No. of children on the roll, Dec., 1953... ..	49	25
No. of children admitted during 1953	9	6
No. of children discharged during 1953	6	2

Arrangements were made at this school for Pure Tone Audiometry to be carried out on any child referred by the school medical officers.

LOSTOCK RESIDENTIAL OPEN AIR SPECIAL SCHOOL FOR DELICATE CHILDREN:

The school admits Bolton pupils only. A school medical officer visited the school weekly in order to keep the children under constant review.

Unless there was a serious contra indication, which applied to very few, the children were free to perform any physical activity. No child was admitted for a period of less than two school terms and the improvement in the medical condition and general nutritional status was usually very marked.

The school was inspected on the 17th, 18th and 19th March, by a medical officer of the Ministry of Education and by Her Majesty's Inspectors.

The following table details the number of children in attendance, admitted and discharged during 1953.

	BOYS	GIRLS
No. of children on the roll at the beginning of the year... ..	61	49
No. of children admitted during 1953	34	36
No. of children discharged during 1953	20	27

An analysis of the medical condition on admission of these children in attendance at the end of the year follows.

MEDICAL CONDITION	NO. OF CHILDREN
Anaemia	4
Asthma	21
Bronchitis	8
Bronchiectasis	3
Cardiac Disease	3
Children recovering from primary tuberculosis complex	2
Poor nutritional status... ..	16
Still's Disease	1
General Debility	96
Pseudo coxalgia	1
Various other conditions	25
TOTAL	180

Children unable to attend school because of Physical Disabilities:

The service of home teachers was needed for 27 children because they were unable to attend school due to physical disability. A total of 1,964 hours' instruction was given.

Since April, 1952, a teacher has attended the Bolton District General Hospital in the afternoons to give instruction to children who were in hospital for long periods.

Lip-Reading Classes:

Lip-Reading Classes were held once a week at Sunning Hill County Primary School and Folds Road School. A qualified teacher of the deaf was in charge of each Centre and 12 partially deaf children attended.

Report of Speech Therapist:

WORK OF THE CENTRE:

Number of patients treated during the year (once weekly basis)... ..	93
New Patients admitted for treatment	41
Treatment completed	39
Number who have left to commence work	1
Patients discharged	6
Patients who have left of their own accord	2
Temporary discharges	1

TYPE OF DEFECT TREATED:	BOYS	GIRLS
Stammering	29	7
Dyslalia (Simple, Multiple and General)	31	14
Aphasia	1	1
Retarded Speech Development	—	1
Cleft Palate Speech (Congenital)	6	1
Cerebral Palsy	1	1
	68	25
TOTAL		93

The Therapist attended a Refresher Course at Nottingham University, and meetings in Liverpool, Huddersfield, Newcastle and Leeds, at her own expense.

The College of Speech Therapists (Lancashire District) held a meeting in the Robert Galloway Clinic, on May 2nd, with the permission of the Education Authority.

THE CARE OF CHILDREN ATTENDING NURSERY SCHOOLS AND CLASSES

Nursery Scools:

Two nursery schools were maintained in the Borough. The children in attendance have been medically examined during the year and a State Registered Nurse maintained a constant review by frequent attendances. The following are the relevant statistics:—

KAY STREET NURSERY SCHOOL:

No. of children on the roll, December, 1953	84
No. of children admitted during 1953	55
No. of children transferred to primary schools	18
No. of children removed by parents	17

PIKES LANE NURSERY SCHOOL:

No. of children on the roll, December, 1953	89
No. of children admitted during 1953	64
No. of children transferred to primary schools	43
No. of children removed by parents	26

Nursery Classes:

There were 1,020 children in attendance at 34 classes held at various infant schools. 989 children were medically examined.

Periodic Medical Inspection:

DEFECTS REQUIRING TREATMENT:

	NURSERY SCHOOLS	NURSERY CLASSES
SKIN:	1	16
EYES:		
Defective Vision	1	2
Squint	9	15
Other	—	4
Blepharitis	2	1
Conjunctivitis	—	1
EARS:		
Defective Hearing	1	2
Otitis Media	2	5
Other	—	4
NOSE AND THROAT:	2	2
Tonsils and Adenoids	—	1
Tonsils	—	30
Nasal Catarrh	—	5
SPEECH:	—	4
CERVICAL GLANDS:	1	1
HEART AND CIRCULATION:	1	1
LUNGS:	2	11
DEVELOPMENTAL:		
Hernia	1	2
Other	—	3
ORTHOPAEDIC:		
Posture	1	1
Flat Foot	2	—
Other	7	9
OTHER DEFECTS OR DISEASES:	7	11
TOTAL	<u>40</u>	<u>131</u>

EMPLOYMENT OF CHILDREN AND YOUNG PERSONS

A total of 444 children were examined during 1953 for employment outside school hours. Thirty-four of the children applied for Juvenile Performers' Licences under the Employment of Children in Entertainment Rules. An analysis of the type of employment for which application was being made follows:—

TYPE OF EMPLOYMENT	NO. OF CHILDREN
Grocers' Assistants	6
Butchers' Assistants	3
Newspaper Delivery	392
Entertainment	34
Shop or Store Assistants	5
Milk Delivery	4
TOTAL	<u>444</u>

All the children were found to be fit for employment in accordance with the Authority's Byelaws.

CHILDREN INCAPABLE OF RECEIVING EDUCATION AT SCHOOL

Seven boys and seven girls were found to be incapable of receiving education at school and were notified to the Local Health Authority under Section 57 of the Education Act, 1944. Five children of school-leaving age were examined and found to require supervision under Section 57(5) of the Education Act. A total of 53 children were examined by medical officers of the Authority because of alleged backwardness.

It is expected that some of these children will be able to obtain benefit from the Occupation Centre which was opened on January 19th, 1954, at Cotton Street by the Local Health Authority. At the centre they will be given simple social training and occupational therapy by trained staff. There will be accommodation for 35 defectives.

ADDITIONAL REPORTS

Tuberculosis:

The School Health Service again co-operated with the Medical Research Council in the follow-up by X-ray of those Bolton school children who are taking part in the extensive trials of anti-tuberculous vaccines. The children concerned had further chest X-ray when the Mass Radiography Unit attended Charles Street School Clinic.

Ultra Violet Light Treatment:

School Medical Officers have recommended 144 children for Ultra Violet Light Therapy. The children were either under weight and in a generally debilitated condition or had suffered from repeated upper respiratory infections and bronchitis. The treatment was given in the Health Department by a qualified physiotherapist.

Co-operation with the Youth Employment Service:

The Youth Employment Service needs to have advice on children leaving school who, for medical reasons, are unsuitable for certain types of employment. When a child has a defect which renders it unfit for certain forms of employment, the school medical officers advise the Youth Employment Officers accordingly by sending to them either Form Y.9 or Y.10, whichever is appropriate.

FORM Y.9:

This form was used for children who had relatively minor defects and who were not likely to need registration under the Disabled Persons (Employment) Act, 1944. Generally speaking, such children were those who had attended ordinary school successfully and were not suffering from severe bodily disablement. The condition from which the child was suffering was not meant to be entered on this form.

FORM Y.10:

This form was used when a child was likely to need registration under the Disabled Persons (Employment) Act, 1944. Such children were those who had been ascertained as severely handicapped pupils, or who suffered from some major bodily defect which would affect employment, e.g. heart disease involving considerable limitation of exercise; severe asthma; and various forms of crippling defect. The form contains a declaration by the parent that the

nature of the disability may be revealed to the Youth Employment Service. This form, therefore, was not completed unless the parent was prepared to sign the declaration. If the parent was not so prepared, Form Y.9 had to be resorted to if, at the discretion of the doctor, it was suitable to the needs of the case.

During 1953, Forms Y.9 were completed in respect of 55 children and Forms Y.10 in respect of 4 children.

Cerebral Palsy:

A review of all the children who were reported as suffering from cerebral palsy was carried out by the school medical officers largely during the school summer holiday. The situation was as follows:—

	BOYS	GIRLS
Admitted to residential schools	1	2
Awaiting admission to residential schools... ..	2	1
Admitted to school for the deaf	2	2
Attending ordinary schools... ..	5	1
Unfit to attend school and at home	5	4
Under process of ascertainment as possibly ineducable	1	1
<i>Totals...</i>	16	11
TOTAL	<u>27</u>	

In addition, one boy was discharged from a residential school, because he had attained school leaving age.

Of those children at home on the 'Out of School' list, one girl was receiving home tuition; 5 (3 girls and 2 boys) were under the age of three; and the remaining 3 were under the age of six, and were extremely severe cases. A close watch and follow-up is being maintained on these children.